

POSITION	ID NO.	DATE
CLASSIFIER	25	03-13-97
EXAMINER	851	4/9
TYPIST	190	4-10-97
VERIFIER	290	4-10-97
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
1	87-10-11
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7	
8	✓
9 (16)	
10 17	
11 18	✓
12 (9)	
13 20	
14 21	
15 22	
16 23	
17 24	✓
18 25	
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SYMBOLS

✓	Rejected
—	Allowed
— (through number)	Cancelled
—	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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(LEFT INSIDE)